## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		
THE CONSERVATIVE STRIKEFORCE		C C00457291
		0 000407201
Check if Z 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee ACTIVE ENGAGEMENT LLC		Public Distribution/Dissemination
		06 18 2014
Mailing Address 44084 RIVERSIDE PKWY		
SUITE 350		
City State Zip Co		1000.00
LANSDOWNE VA 20176		ction ID : SE.82007 Disbursement or Obligation
		06 18 2014
Name of Federal Candidate	Support Office Sought:	House District: 00
CHRISTOPHER BRIAN MCDANIEL	Oppose Presiden	nt Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	Disbursement 2014 Oth	For: Primary General ner (specify) ▶ Runoff
Full Name of Payee	Date of	Public Distribution/Dissemination
	M	M / D D / Y Y Y Y
Mailing Address		
	Amoun	t
City State Zip Co	ode	
	Date of	Disbursement or Obligation
		M / D D / Y Y Y Y Y
Name of Federal Candidate	Support Office Sought:	House District:
	Oppose Presider	nt Senate State:
Calendar Year-To-Date	Disbursement	For: Primary General
Per Election for Office Sought	Oth	ner (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
SCOTT B MACKENZIE  [Electronically Filed] Date 06 18 2014		
Signature		